

## CANDIDATE'S STATEMENT OF ORGANIZATION AND DESIGNATION OF PRINCIPAL COMMITTEE OR EXPLORATORY COMMITTEE

(CFA-1)

State Form 4604 (R13/9-10) Indiana Election Commission (IC 3-9-1-3; IC 3-9-1-4; IC 3-9-1-5)

## PLEASE TYPE OR PRINT LEGIBLY IN BLACK INK. SEE INSTRUCTIONS ON REVERSE SIDE.

				FILE NUMBER
1. IS THIS AN AMENDMENT?	No □ Yes If Yes	, please enter the file	number in this box —	
SECTION A. CANDIDATE INF				I
2. Last Name	First Name	Middle Name	Nickname	3. Type of Committee (Check one)
		,	./a	M
Tilford	Jody	Lee	NIA	☐ Exploratory Committee
Tilford Jody Lee N/A Exploratory Committee  4. Malling Address   5. FAX (Optional)   6. E-mail Address (Optional)				
1354 PAYTON AUC () N/A Josephone (Day) 10. Telephone (Evening)				
7. City Sta	ite ZIP Code	8. County	9. Telephone (Day)	10. Telephone (Evening)
1354 PAYTON AUE 7. City Sta TNdpis, IT	46219		i	7 (2/7) 797 2037
11. Party Affiliation	1070	12. Office Sout	iht (Include district number, if ar	7 (317) 797 · 2037 ry. Not required for an exploration committee)
Democratic Libertarian Republican Other WARREN TOWNShip BOARD DIST. 1 JU				
SECTION B. COMMITTEE IN				
13. Full Name of Committee (Do not abbrevia	ate) M Check if this is a	пеж пате		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
14. Mailing Address	CO MADA	2 Tanchin	B-100	
14. Mailing Address	ew address	15. FAX (	Optional) 16. E	mail Address (Optional)
1254 P. 5 11 110		(1011111	AllA L	1 41/ 000 00011
17 City	to 710 Code	110 County	10 Telephone	20. Committee Organization Date
- 10/s	1 /// 040	10. County	is. rerepriore	(MM-DD-YY)
LNOPIS, I	V 76214	MARCION	J(311) / 47-202	101-25-16
1354 PAYON AVE  17. City  State ZIP Code 18. County 19. Telephone 20. Committee Organization Date  TNJPS, IN 46219 MARCON 317 797-2037 (MM-DD-YY)  21. Chairperson's Full Name Designate Candidate as Chairperson Check if this is a new chairperson				
Jody Lee Til- 22. Mailing Address ☐ Check if this is a no	Ford			
22. Mailing Address 🔲 Check if this is a ne	ew address	23. FAX (	Optional) 24. E	mail Address (Optional)
1354 PALTON AUR	,	( )	N/A Jos	Autilford @ GMAIL. COM
25. City Sta	te ZiP Code	26. County	27. Telephone (Day)	28. Telephone (Evening)
Tudale T	0 4/219	MAD'	317 797 763	7 , 3,7 , 797 , 2037
29. Bank or Other Denositaties (List all bank	rs or other depositories in v	which the committee demosits	funds holds accounts rante sai	ety denosit hoves or maintains funds
1354 PAYTON AVE   N/A   Jedy Tilfald @ GMAil. com   25. City   State   ZIP Code   26. County   27. Telephone (Day)   28. Telephone (Evening)   IN   262.19   MARion   (317) 797-2037   (317) 797-2037   29. Bank or Other Depositories (List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.)				
30. Exploratory Committee (Give brief statement explaining purpose of an exploratory committee only.) 31. Salaries and Reimbursements (Will the committee pay the candidate a salary or				
30. Exploratory Committee   Circ the statement	explaining purpose of an explor	reimburs	ement for lost wages? If Yes, al	tach a copy of the contract.) X No Yes
				· · · · · · · · · · · · · · · · · · ·
SECTION C. APPOINTMENT	OF TREASURER	(IC 3-9-1-14)		
32. I, as Chairperson of the forcemmittee, appoint the following pe			1 -11	Committee Chairperson
Treasurer of the Committee.	Jody	6 Tilfold	lande	I Tilbrel
committee, appoint the following po Treasurer of the Committee, 33. Treasurer's Full Name	andidate as treasurer	Check if this is a new treasu	urer /	7
34. Mailing Address				
		,	· · · / / /	
1354 PAYTON AVE 37. City Star Indpls. In	te ZIP Code	38. County	39. Telephone (Dav)	Y Tilford @ GMA: 1. COM
T 11/6	1// 2/0	MARION		l l
INdpis.	1 46219		(311)191-205	17 (317) 797-2037
	OF APPOINTMEN			
41. I give notice that I accept the	duties and responsib	oilities of Treasurer of	this Signature of Person	Accepting Appointment
Committee. I am not the chairperso permitted for a candidate committee u		ance committee (excep	it as	7 Tillad
	OF STATEMENT			FOR OFFICE USE ONLY
We certify as the candidate and th		nairperson of the Com	mittee and that we have	
examined this statement. To the best				_
42. Typed or Printed Name of Chairpe	rson Signature of	Chairperson	Date (MM-DD-YY)	FILED
lade 1 Till CI	0 /	1 7 700	D 01/24/16	
43. Typed of Printed Name of Candida	ite Signature of	Candidate	Date (MM-DD-YY)	IAN 9.7 and
	Signature of			JAN <b>27</b> 2016
Jody L. Tiltode	I book	2 Tollow	d 01/25/16	
Warning: State law requires that any change	e in this information by	orted within 10 days of the	change (IC 3-9-1-10). A person	Myla a. Eldridge
who knowingly files a fraudulent report commits a Class D felony (C 3-14-1-13). A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B misdemeanor (IC 3-14-1-14), and may be subject to civil				
penalties (IC 3-9-4-16, IC 3-9-4-17, and IC 3-9		as D mispernegnol (10 3-)4-)		